

SEMI-ANNUAL LOBBYING EXPENDITURE REPORT FOR EMPLOYERS OF LOBBYISTS

INSTRUCTIONS: This Semi-Annual Lobbying Expenditure Report is for raporting all expenditures relating to lobbying in the State of Tennessee. Pursuant to T.C.A. § 3-8-303(a), this Report is due within forty-five (45) days after the conclusion of the six-month periods ending March 31 and September 30. The Report must be filed with the Tennessee Ethics Commission, 201 4th Avenue North, Butte 1820, Nashville, TN 37243. If you have questions, please feel free to contact the Commission at (618) 263-8634 or e-mail us at <a href="https://doi.org/10.1001/10.100

1	Θ,	DATE OF DISCLOSURE NOV. 5 2007			
	ъ.	REPORTING PERIOD [check box]: □ October 1 - March 31 XX April 1 - September 30			
2,	B , ,	NAME OF CORPORATION/ENTITY Tennesses Outdoor Advertising Cooperative			
	Þ.	NAME OF CEO, CFO, or TITLE AND NAME of PERSON RESPONSIBLE FOR SUPERVISING			
		Scott Tarov			
i.	21,	ADDRESS Street or Rural Route City State Zip Gode			
		250 Forest Avenue			
		Chattanooga, IN 37405			
	b,	PHONE NUMBER 423-267-6300			
•	LOBBYING INTERESTS				
	a,	List the general aubject area(s) lobbled, e.g., "healthcare," "insurance," sto. Outdoor advertising			
	b,	Describe the general nature and interest of the entity employing or retaining lobbying services, e.g.			
		Professional association			
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Fage 2 of 3 TOTAL AGGREGATE LOBBYIST COMPENSATION. The term "compensation" is defined by T.C.A. § 3-8-301(7) as "... any salary, fee, payment, reimbursement or other valuable consideration, or any combination thereof, whether received or to be received; however, 'compensation' does not include the salary or reimbursement of an individual whose tobbying is incidental to that person's regular employment."

State the aggregate total amount of lobbylat compansation paid by the employer. For purposes of the disclosure, compensation paid to any lobbylat who performs duties for the employer in addition to lobbying and related activities shall be apportioned to reflect the lobbylat's lime allocated for lobbying and related activities in this state (see more detailed definitions of "Lobbying," "Administrative Action" and "Legislative Action," and exceptions thereto, in

If you did not pay any lobbylet compensation during the reporting period, you may check the box marked "None", or you may instead check the range for "Less than \$10,000". If you are unsure whether you may have paid a portion of compensation for lobbying activities during the reporting period, then you should check the box for "Less than \$10,000." Authority: T.C.A. § 3-8-303(a)(1)(A)-(K). (Check the appropriate box.)

a Nane	X Leas then 810,000
□ At least \$10,000 but less than \$25,000	□ At least \$25,000 but less than \$50,000
□ At least \$50,000 but less than \$100,000	□ At least \$100,000 but less than \$150,000
u At least \$150,000 but less then \$200,000	D At least \$200,000 but less than \$250,000
p At least \$250,000 but less than \$300,000	□ At least \$300,000 but less than \$380,000
o At least \$350,000 but less than \$400,000	= \$400,000 or more, round the aggregate total to the nearest tifty thousand deliers (\$50,000);

8. LOBBYIST NAMES. List the names of the individual lobbyists who rendered services in the State of Tennessee. Indicate whether they are employed within your organization by checking the "in-House Lobbyist" box. Attach additional pages as needed. Authority: T.C.A. § 3-6-309(a)(1).

LOBBYIST NAME	IN-HOUSE LOBBYIST
	0
Nathan Ridley	<u></u>
	<u> </u>

7. LOBBYING-RELATED EXPENDITURES

NOTE: For the purposes of this Report, any expanditure made for the purpose of achieving a multi-state effect shall be apportioned equally among those states.

Excluding lobbyist comparation (which is reported under 5), state the aggregate total of expanses paid directly by the amployer to third party vendors, for the purpose of influencing legislative or administrative action through public opinion or grassroots action in the State of Tennassee. These expanditures include, but are not limited to, costs relating to printing, publishing, advartising, broadcasting, paid announcements, audiotepes, videotapes, compact diagraphic digital video diags, informercials, railies, demonstrations, seminars, inclures, conferences, postage, telephone related costs, internet services, public relations activices, governmental relations services, polling services, travel expanses, grants to issue groups or grassroots organizations or any other expanses incurred lobbying.

If you did not pay any lobbying expenses during the reporting period, you may check the box marked "None", or you may instead check the range for "Less than \$10,000". If you are unsure whether you may have paid minor expenses relating to lobbying sclivities during the reporting period, then you should check the box for "Less than \$10,000." Authority: T.C.A. § 3-8-303(a)(2)(A)-(K). (Check the appropriate box.)



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□ None	22 Loss than \$10,000
m At least \$10,000 but less than \$25,000	□ At least \$25,000 but less than \$50,000
n At least 850,000 but less than \$100,000	☐ At least \$100,000 but less than \$180,000
□ At least \$150,000 but less than \$200,000	□ At sast \$200,000 but less than \$250,000
다 At least \$260,000 but less than \$300,000	□ At least \$900,000 but less than 5360,000
ਰ At least \$350,000 but less than \$400,000	o \$400,000 or more, round the aggregate total to the nearest fifty. thousand dollars (\$60,000):

8. AGGREGATE TOTAL OF ALL IN-STATE EVENTS

State the appragate total amount of all employer expenditures for all in-State event(s) (e.g., those events to which the amployer invited the antire General Assembly), which was, or should have been, reported to the Commission pursuant to T.C.A. § 3-8-305(b)(8). Authority: T.C.A. § 3-6-303(a)(3).

to T.C.A. § 3-8-305(b)(8). Authority: T.C.A. § 3-8-303(a)(3).	, reported to the Commission pursuant				
None					
	•				
9. TO BE SIGNED BY REPORTING OFFICIAL (must be attested to b	y a witness)				
I certify that the information contained in this Report is true and that it is best of my knowledge, information and belief.	a complete and accurate report to the				
(•				
Signature of Person Completing Report Print Name of Person:	Date				
I, the undereigned, acknowledge that I have reviewed the foregoing Report and certify that is complete and socurate to the helpt of my longwadge, information and belief.					
Signature of CEO, OFO or Alihorized Representative	1/5/07				
Sant Addition of Leaven!	Date				
i, Johnie J La Foy the undersigned, do hereby witness the ab (Printed Name of Witness) OFO or Authorized Representative, which	nove algneture of the CEO. I was signed in my presence.				
Signature of La Foy	11/8/07				
	Date				

